

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 113 OF 443
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Midwest Values PAC

Full Name (Last, First, Middle Initial)

A. Julia Hogan

Mailing Address 5305 Washington Blvd

City
IndianapolisState
INZip Code
46220-3062FEC ID number of contributing
federal political committee.

C

Name of Employer
Indiana Perinatal NetworkOccupation
Health Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	14	/	2015

Transaction ID : C6418832

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Marjory Holder

Mailing Address 202 Flannery Fork Rd

City
Blowing RockState
NCZip Code
28605-9330FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Family Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2015

Transaction ID : C6423959

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Reese Holser

Mailing Address 2820 Richmond Ave

City
OaklandState
CAZip Code
94611FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : C6450970

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00